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TRANSMITTAL FORM Filing Date December 29, 2000 (to be used for all correspondence after initial filing) First Named Inventor Michael S. Ripley Art Unit 2134 **Examiner Name** Thomas M. Ho Total Number of Pages in This Submission Attorney Docket Number 42390P9905 **ENCLOSURES** (check all that apply) After Allowance Communication to Group Drawing(s) Fee Transmittal Form Appeal Communication to Board of Appeals and Interferences Fee Attached Licensing-related Papers Appeal Communication to Group Amendment / Response Petition (Appeal Notice, Brief, Reply Brief) Petition to Convert a Provisional Application After Final **Proprietary Information** Affidavits/declaration(s) Power of Attorney, Revocation Change of Correspondence Address Status Letter **Extension of Time Request** Other Enclosure(s) **Terminal Disclaimer** (please identify below): **Express Abandonment Request** Request for Refund Return Postcard Information Disclosure Statement PTO/SB/08 CD, Number of CD(s) Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Remarks **Basic Filing Fee** Declaration/POA Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Gregory D. Caldwell, Reg. No. 39,926 Individual name BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP Signature Date January 4, 2005 **CERTIFICATE OF MAILING/TRANSMISSION** I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box

Application No.

09/752,545

Date

January 4, 2005

Gayle Bekish

1450, Alexandria, VA 22313-1450.

Typed or printed name

Signature

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SEE TOANSMITTAL	Complete if Known			
TRANSMITTAL	Application Number	09/752,545		
for FY 2005	Filing Date	December 29, 2000		
Patent fees are subject to annual revision.	First Named Inventor	Michael S. Ripley		
Applicant claims small entity status. See 37 CFR 1.27.	Examiner Name	Thomas M. Ho		
	Art Unit	2134		
TOTAL AMOUNT OF PAYMENT (\$)	Attorney Docket No.	42390P9905		

METHOD	OF PAY	MENT (c	heck all	that apply)			
Check	Credit ca	ard \square M	loney O	rder None Other (please identify):			
Deposit A	Account D	eposit Ac	count N	lumber: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Za	afman LLP		
☐ Cha ∑ Cha	rge fee(s)	indicated	l below fee(s) or	ount, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the underpayment of fee(s) Credit any overpayments 18 and 1.20.	filing fee		
FEE CALCU	LATION	,					
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Fee Fee Code (\$)		Fee Code	Fee (\$)	Fee Description	Fee Paid		
1051	130	2051		Surcharge - late filing fee or oath			
1052	50	2052		Surcharge - late provisional filing fee or cover sheet.			
2053	130	2053		Non-English specification			
1251	120	2251		Extension for reply within first month			
1252	450	2252		Extension for reply within second month			
1253	1,020	2253		Extension for reply within third month			
1254	1,590	2254		Extension for reply within fourth month			
1255	2,160	2255		Extension for reply within fifth month			
1401	500	2401	250	Notice of Appeal			
1402	500	2402	250	Filing a brief in support of an appeal			
1403	1,000	2403	500	Request for oral hearing			
1451	1,510	2451	1,510	Petition to institute a public use proceeding			
1460	130	2460	130	Petitions to the Commissioner			
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)			
1806	180	1806	180	Submission of Information Disclosure Stmt			
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))			
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))			
Other fe	ee (spe	cify) _					
				SUBTOTAL (2) (\$)			

SUBMITTED BY Complete (if applicable)					lete (if applicable)	
Name (Print/Type)	Gregory D. Caldwell	11/11	Registration No. (Attorney/Agent)	39,926	Telephone	(503) 439-8778
Signature		lld			Date	01/04/05



2134 Jh

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

AMENDMENT AND RESPONSE

COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Applicant appreciates the Examiner's attention to the present application. In response to the Office Action dated October 6, 2004, please amend the application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this response.

Remarks/Arguments begin on page 8 of this response.